Activity A: Epidemiology Capacity - Continuing activities

A. <u>Personnel - \$304,043</u> OK

General Epidemiologist (1.0 FTE, 12 months) (Barton) \$51,626 The general epidemiologist will participate in on-call duty and outbreak response for all diseases under the responsibility of the Epidemiology Program including foodborne, waterborne, zoonotic, hepatitis, most respiratory diseases and BT agents. He/She will participate in working with local public health for outbreaks that are large, complex or of national significance. He/She will be available for surge capacity for other communicable diseases such as H1N1.

Epidemiologist II (1 FTE, 12 months) (Onofrey) \$66,573 The Epidemiologist II will be responsible for overseeing all project objectives proposed for enhanced hepatitis surveillance, heath care associated infections and and transfusion associated infections.

General Epidemiologist (1.0 FTE, 12 months) (Vostok) \$51,626

Position formally funded from ELC Core activities

Ms. Vostok will share responsibilities for all program objectives requiring epidemiology support. She will participate in activities related to antibiotic resistance, foodborne outbreak investigations, HUS and STEC surveillance activities. She will also participate in all ELC educational and training activities.

Emerging Infection Epidemiologist (1.0 FTE, 12 months) (Osborne) \$59,513 *Position formally funded from ELC Core activities*Mr. Osborne will share responsibilities for all program objectives requiring epidemiology support. He will also be specifically responsible for disease response activities related to surveillance for antibiotic resistance, invasive Group A strep, *C. difficile* and listeriosis. He will also participate in all ELC educational and training activities.

Epidemiology Morbidity & ELC Coordinator (1 FTE, 12 months) (Fleming) \$74,705

Position formally funded from ELC Core activities

Mr. Fleming will share responsibilities for all program objectives requiring epidemiology support. He will also serve as the primary liaison with the laboratories on cooperative agreement matters. He will have primary responsibility for ensuring all progress reports, cooperative agreement reapplications and other necessary documentation are submitted to CDC. He will also oversee all activities of ELC funded and in-kind funded epidemiologists.

Massachusetts ELC – CDC-RFA-CI10-101202PPHF11 Activity A May 31, 2011

B. Fringe Benefit - \$106,902 OK

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel - \$24,540</u> \$9,000

In State - \$18,000

In-state travel is required for epidemiology staff to visit boards of health, private practices, clinics, regional offices, local and state agencies and hospitals to provide in-service training and follow-up to implement and monitor grant guidelines and objectives and solicit participation in active surveillance activities. Epidemiology and laboratory staff to travel approximately 40,000 miles x \$0.45=\$18,000

Out of State -

Funding is requested for five persons to attend:

North East Epidemiology Conference -	November 3, 2011, Rhode Island
5 x \$200 conference fee	\$1,000
5 x \$150 hotel x 1 night	\$ 750
Per Diem five @\$25 pp	\$ 125
Transportation costs	\$ 180

Total \$2,055

CDC Meeting – as required, Atlanta, GA

Funding is requested for three persons to attend a meeting at CDC as may be required by grant funding.

Air @\$1,000 pp x 3 persons	\$3,000
Lodging @\$160 x 2 nights x 3 persons	\$960
Per Diem – 3 days @\$25 pp/pd (3)	\$225
Ground Transportation \$100 pp	\$300

Total \$4,485

D. Equipment - \$0

E. <u>Supplies - \$2,500</u>

Funding is requested for general office supplies to support activities @\$500 per year/per person.

Massachusetts ELC – CDC-RFA-CI10-101202PPHF11 Activity A May 31, 2011

F. Contractual \$0

G. Construction - \$0

H. Other \$42,290 \$5,865

Information Technology Support charge back – \$5,490 (\$1,098 x 5 persons) OK A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back – \$375 OK

A fee of \$75 per year/employee to offset payroll costs for each employee. (Five x \$75 = \$375)

Postage to support all activities - \$20,000

Funding is requested to support routine programmatic activities. MDPH Bureau of Communicable Disease Control maintains a centralized inventory system where order forms from around the state for education and training materials are received and processed.

Printing - \$15,000

Support is requested for printing of educational and training materials including Fact Sheets, alert notices, posters and manuals. In addition to routine programmatic activities, the MDPH Bureau of Communicable Disease Control maintains a centralized inventory system where order forms from around the state for education and training materials are received and processed.

Training \$1,425

Funding is requested for SAS training for epidemiologists. 3 courses @\$475 each.

Total Direct Charges: \$480,275

Indirect: \$44,998 OK

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Epidemiology Capacity - Activity A Total - \$525,273 \$473,308

Massachusetts ELC – CDC-RFA-CI10-101202PPHF11 Activity A May 31, 2011

Activity B: Laboratory Capacity - Continuing activities

A. Personnel: \$93,470 OK

Bacteriologist III (1 FTE, 12 months) (Jones) \$54,240 Ms. Jones will validate and implement the RT-PCR assays for measles, mumps, rubella, pyrosequencing for influenza drug resistance.

Bacteriologist I (1 FTE, 12 months) (Jani) \$39,230 Ms. Jani will perform Salmonella serotyping and other microbiologic and molecular laboratory procedures.

B. Fringe Benefits: \$32,864 OK

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel: \$3,360</u> \$0

Out of state travel - \$3,360

Meeting with CDC as may be requested - time and place TBD.

Air @\$1,000 pp x 2 persons	\$2,000
Lodging @\$160 x 3 nights x 2 persons	\$960
Per Diem – 4 days @\$25 pd/pp (2)	\$200
Ground Transportation \$100 pp	_\$200
•	\$3,360

D. Equipment: \$0

E. Supplies: \$72,000 OK

Lab supplies - Objective 1: \$27,000 RT-PCR kits and reagents \$10,000, nucleic acid extraction kits \$10,000, pyrosequencing kits \$5,000, disposables \$2,000

Lab Supplies – Objective 2: \$45,000

Funding is requested to perform testing, including restriction enzymes \$12,000, agarose \$5,000, media \$8,500, reagents \$7,500, Salmonella commercially-acquired antisera \$5,000, disposables \$5,000 (tips, swabs, loops needles etc); gel supplies \$2,000

F. Contractual: \$0

G. Construction: \$0

H. Other: \$2,346 OK

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Information Technology Support charge back – \$2,196 (\$1,098 x 2 persons) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back - \$150 A fee of \$75 per year/employee to offset payroll costs for each employee. (two x \$75 = \$150)

Total Direct Charges: \$204,040

Indirect: \$13,834 OK

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Laboratory Capacity - Activity B Total - \$217,874 \$214,514

Massachusetts Department of Public Health ELC – CDC-RFA-CI10-101202PPHF11

Budget Request Fund as requested \$385,300

Activity C: Health Information Systems Capacity - Continuing activities

A. Personnel: \$0

B. Fringe Benefits: \$0

C. <u>Travel: \$0</u>

D. Equipment: \$0

E. Supplies: \$0

F. Contractual: \$349,800

BID Health Information Exchange Technical Direction: \$195,000

Name of Contractor: Strategic Solutions Group, SSG.

Method of Selection: This contract was competitively procured in accordance with

Massachusetts Law, 801 CMR 21.

Period of Performance: 8/01/2011- 07/31/2012 (12 months)

Scope of work: The contractor will provide technical direction and subject matter expertise for all BID projects related to health information exchange, including ELR, electronic medical record reporting, and HL7 support, and oversee all technical aspects of messaging between the electronic data reporting infrastructure and MAVEN. The contractor will guide PHIN-MS implementation efforts to send data from the BID to CDC. The contractor will also develop quality assurance reports to ensure the timely and accuracy of health information sent to BID. This contractor is necessary for meeting the Health Information Systems required metric (number and percent of labs using ELR).

Method of Accountability: The contractor will report to the Director for Information Technology, Bureau of Infectious Disease.

Budget: \$195,000 (37.5 hrs weeks x 52 weeks x \$100 hr.)

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IT project management LIMS support services: \$39,200

Name of Contractor: VT Regina and Associates

Method of Selection: This contract was/will be competitively procured in

accordance with Massachusetts Law, 801 CMR 21.

Period of Performance: 8/1/2011 – 7/31/2012 12months

<u>Scope of work</u>: Contractor will provide IT project management LIMS support services. This includes the coordination of a detailed work plans, a project plan, WBS and status reports for the implementation of the Viral Serology component into the LIMS, including required ELR and Rhapsody interfacing and messaging. VT Regina and Associates will also provide HL7 SME services, including the

Massachusetts ELC – CDC-RFA-CI10-101202PPHF11

Activity C

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identification of data elements needed for accepting electronic orders and reports and assisting in the review of all proposed HL7and MDPH ORM message structure changes. This includes submitting reportable laboratory results to the BID and other public health agencies using HL7 and LOINC and SNOMED vocabulary standards. Results transmitted during this period will be in testing to certify the message structure and vocabulary.

Method of Accountability: The contractor will report to the Division/Director for Informatics for the Massachusetts Department of Public Health.

Budget: \$39,200 = 8hrs/week X 50 weeks X 98/hr

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IT Programming Support \$115,600

Name of Contractor: Contractors will be chosen from a list a contractors that provide services as outline in scope of service. The list of contractors is complied by the Massachusetts Operational Service Center after an extensive competitive procurement, background checks and establishment of quality, and pricing agreements

<u>Method of Selection</u>: This contract was/will be competitively procured in accordance with Massachusetts Law, 801 CMR 21.

Period of Performance: 12 months

<u>Scope of work</u>: Contractors will provide programming support for the development of the Viral Serology LIMS components and assist in HL7 message upgrade. Programming support will augment existing in-house staff for the development. Selected staff will be proficient in VB.NET, SQL, .NET, SQL Reports and be certified in Microsoft technologies. Specific application development activities include the implementation of HL7 messaging, deployment of the WebLogic JMS Bridge, which allows PHIN complaint communication between the Laboratory Information management System (LIMS) and ELR, development of detailed specifications for the SLIS Viral Serology LIMS module. IT support will also assist in the development of the Norovirus PCR and sequencing assay components into the IML LIMS. Development work will begin once the assays are validated by the laboratory. Reporting will include submission of results to CaliciNet.

<u>Method of Accountability</u>: The contractor will report to the Division/Director for Informatics for the Massachusetts Department of Public Health.

Budget:

- 1. VB.NET, SQL Programming Support \$85,000 = 25/hr week x \$68/hr X 50 weeks
- 2. J2EE, WebLogic, Hibernate Oracle Programming Support \$30,600= 37.5 hr/week X \$68/hr X 12 weeks = \$30,600

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Massachusetts ELC – CDC-RFA-CI10-101202PPHF11 $Activity\ C$ $May\ 31,\ 201$ Massachusetts

G. Construction: \$0

H. Other: \$35,000

Software – Rhapsody \$10,500

Funding is requested for Rhapsody IDE software support and maintenance for ELR messaging and LIMS interfacing.

Software – Licenses \$25,000

Funding for 100 additional ELR user licenses to support the expanded number of BID and BLS users on the system. The cost is \$250 per user license.

Total Direct Charges: \$385,300

Indirect: \$0

Health Information Systems Capacity - Activity C Total - \$385,300 OK

Activity D1.A. – HAI Prevention Infrastructure

Funding request for HAI Prevention Infrastructure is for seven (7) months (January 2012 – July 31, 2012).

HAI Prevention Infrastructure activities are currently funded from ARRA award that expires 12/31/2011.

A. <u>Personnel: \$90,061</u>

\$45,000

HAI Coordinator (1 FTE, 7 months) (McHale)

\$66,230

Ms. McHale will be responsible for the ongoing statewide coordination, implementation and overall management of HAI surveillance, reporting and prevention activities. Responsibilities include reporting on progress towards goals and objectives detailed in the state HAI plan; planning, and facilitating the HAI multidisciplinary Technical Advisory Group (TAG); assisting in the development of HAI related reports and training materials. In collaboration with Principle Investigator, the TAG and additional stakeholders will continue to assess priority prevention needs. Will manage and coordinate all HAI activities outlined in activities D.1.A. and D.1.B. including performance measures and tracking of all tasks.

Program Assistant (1 FTE, 7 Months) (Johnson)

\$23,831

Ms. Johnson will work with and at the direction of the HAI Coordinator to support all aspects of the HAI program including managing meeting logistics, coordinating communications, assisting with preparation of HAI related training materials and reports, posting information on the MDPH website and record keeping. Will also provide administrative support for the *C. difficile* collaborative described in detail in section D.1. B.

B. Fringe Benefits: \$31,665

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel: \$1,810</u> OK

In State Travel – \$315

Funding is requested to support the in–state cost for travel required to attend trainings, collaborative meetings and conferences, and contractor site visits. (\$0.45/mile x 700 miles = 100 miles per month x 7 months).

Out of State Travel – \$1,495 As a requirement of this funding support is requested for HAI Coordinator to travel for one national CDC sponsored meeting.

Airfare (round trip) \$1,000 x 1 person \$1,000

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Hotel \$160 per night x 2nights	\$320
Meals \$25 per day x 3 days x 1 person	\$75
Ground transportation	<u>\$100</u>
	\$1,495

D. Equipment: \$0

E. **Supplies: \$1,000** OK

Funding is requested for general office supplies to support activity \$500/pp/yr

F. Contractual: \$0

G. Construction: \$0

H. Other: \$2,346

Information Technology Support charge back – \$2,196 (\$1,098 x two person) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back – \$150

A fee of \$75 per year/employee to offset payroll costs for each employee (2 x \$75).

Total Direct Charges: \$126,882

Indirect: \$13,329 \$6,660

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Total: HAI Prevention Infrastructure \$140,211\$\$71,473

Massachusetts ELC – CDC-RFA-CI10-101202PPHF11 Activity D.1.A – HAI Infrastructure May 31, 201

Activity D.1.B: - Total Award - \$450,000

Hospital Acquired Infections – Prevention Collaborative

New Activity

A. Personnel: \$57,250 OK

Epidemiologist I (1 FTE, 12 months) (TBH) \$57,250

Epidemiologist will support and guide the work of the *Clostridium difficile* collaborative. Under the direction of the state epidemiologist and working as a member of the HAI Program staff will serve as a primary liaison to the *Clostridium difficile* collaborative. Will assist in the collection, analysis and dissemination of baseline survey information; assess completeness and accuracy of reported data; analyze, interpret and present routine feed back of reported measures to collaborative participants, Collaborative Director, TAG, and HAI Coordinator; present findings including potential barriers at meetings and conferences; and assist in the evaluation of the prevention activity.

B. Fringe Benefits: \$20,129 OK

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel: \$0</u>

D. Equipment: \$0

E. <u>Supplies: \$500</u> OK

Funding is requested for general office supplies to support activity \$500/pp/yr

F. Contractual: \$411,923 \$362,475

MDPH will contract with an experienced prevention program to plan and implement a new learning collaborative to include the settings of acute and long term care.

Name of Contractor:

Massachusetts Coalition for Prevention of Medical Errors, Burlington MA

Method of Selection:

Contractor has been/will be selected after a competitive procurement in accordance with Massachusetts Law.

$$\label{eq:massachusetts} \begin{split} & \text{Massachusetts} \\ & \text{ELC} - \text{CDC-RFA-CI10-101202PPHF11} \\ & \textit{Activity D.1.B} \\ & \textit{May 31, 201} \\ & \text{Massachusetts} \end{split}$$

Using existing contracting mechanisms, and the experience and expertise of current MDPH professional and budget staff, MDPH will be able to initiate proposed the activities below immediately after the receipt of the award.

Period of Performance: August 1, 2011- July 31, 2012 (12 months)

Scope of work:

The contractor's project team will be responsible for the following specific tasks as outlined in proposal and workplan: Building on the ARRA funded Clostridium difficile collaborative, will target approximately 24 acute care hospitals for recruitment that currently participate in established collaboratives and those that are participating in the State Action on Avoidable Rehospitalizations (STAAR) initiative. With the support and guidance of the Massachusetts Senior Care Association will identify and enroll approximately 72 long term care facilities to participate. Plan and implement a learning collaborative over the grant period targeting Clostridium difficile, using a mixed method approach combining conventional quality improvement strategies with the positive deviance approach to practice improvement. Collaborative work will include planning and conducting meetings, coaching calls, developing and maintaining an active listserve and additional elements defined in the narrative. Engage DPH staff in the collaborative to develop the expertise for future collaborative work. Program development and implementation will occur with guidance from the HAI Technical Advisory and additional content experts. Coordination with MHA and the Massachusetts Senior Care Association for ongoing engagement of hospital and long term care facility leaders. Ongoing coordination of work with other Massachusetts initiatives such as Masspro (QIO) and STAAR.

Method of Accountability: The Contractor will sign a Commonwealth of Massachusetts Standard Terms and Conditions document that allows the Division to monitor and enforce strict contract conditions. In addition, the contractor will be required to follow a timeline with payment only upon receipt of deliverables. The HAI Program Coordinator will work closely with the contractor to ensure receipt of deliverables and that timelines are kept.

See budget page 3 and additional budget details on pages 4-6

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Budget: \$411,923 (Budget detail follow listing)

Contactor Detail Budget	% time	12 Months	
Program Director	0.25	\$40,196	
Collaborative Director /improvement advisor		\$99,194	
Project Manager	0.50	\$29,308	
Positive deviance consultant		\$30,000	
Event planner Long Term Care Consultant, Mass Senior Care		\$25,000	
Association		\$50,000	
LTC IP and Expert Consultant Stipends/scholarships for collaborative		\$10,225	
participants		\$30,000	
Subtotal Contracted Workforce			\$313,923
Conference Expenses			
Expense for 5 full day learning sessions (10,000			
each)		\$50,000	
Expense for 8 regional meetings (1,500 each)		\$12,000	
Expense for 8 conference calls: (6 w/100 lines, 2			
w/200 lines)		\$14,000	
Travel for learning session faculty		\$10,000	
Honoraria for expert faculty		\$4,000	
Web support		\$2,000	
Printing and supplies		\$6,000	
Subtotal			#0.0 0.00
Conference Expenses			\$98,000

Total: MA Coalition for Prevention of Medical Errors

-\$411,923\$362,475

$$\label{eq:massachusetts} \begin{split} & \text{Massachusetts} \\ & \text{ELC} - \text{CDC-RFA-CI10-101202PPHF11} \\ & \textit{Activity D.1.B} \\ & \textit{May 31, 201} \\ & \text{Massachusetts} \end{split}$$

contract details (as listed above):

Executive Director, Paula Griswold

\$40,196

Percent of Effort: 25% of full time

Paula Griswold, the Coalition Executive Director, will have overall responsibility for the improvement collaborative. Responsibilities include the following:

- Oversee the Collaborative Director, Project Manager, and others in the general management of day-to-day activities of the project, including budget and project reporting, organization of educational programs, production of materials, and work with key partners on outreach
- Oversee the activities of the project in achieving goal of reducing infection rates in the area selected for focus
- Maintain liaison with MDPH HAI Coordinator, HAI Leadership Group, Massachusetts Senior Care Association, Masspro, Massachusetts Hospital Association, Healthcare Associated Infection Technical Advisory Group, and other key partners throughout state.

Collaborative Director, Susanne Salem-Schatz

\$99.194

The Collaborative Director will have responsibility to the Coalition Executive Director for the project development, implementation and results. Specific responsibilities include the following:

- Work with Coalition, HAI Coordinator, HAI Leadership Group, HAI
 Technical Advisory Group, Massachusetts Senior Care Association,
 Masspro and CDC on overall strategy to support collaborative improvement
 initiative
- Design curriculum with Executive Director, Massachusetts Senior Care
 Association, hospital representatives, long term care facility representatives,
 outside expert faculty in Positive Deviance, MDPH and the CDC
- Develop materials with faculty and participants for educational programs and calls
- Communicate with hospitals and long term care facility teams on method for data collection, reviewing reports, and providing feedback to participating hospitals and long term care facility teams

Project Manager, Fiona Roberts

\$29.308

Percent effort: 50% of full time

The Project Manager will provide support for the daily operations of the project. Responsibilities include:

- Develop communication schedule, and distribute program announcements for collaborative calls and educational programs
- Manage registration and billing for educational calls and programs that require registration and payment

$$\label{eq:massachusetts} \begin{split} & \text{Massachusetts} \\ & \text{ELC} - \text{CDC-RFA-CI10-101202PPHF11} \\ & \text{Activity } D.1.B \\ & \text{May } 31, \ 201 \text{Massachusetts} \end{split}$$

- Communicate with faculty for educational conference calls
- Manage registration and moderate listserve for improvement collaborative
- Budget tracking and reporting for the improvement collaborative
- Planning travel and communication with program faculty
- Provide administrative assistance developing materials for continuing education and distributing credits, finalizing slide presentations, preparing mailings, filing and general administrative support associated with project meetings and communications

Positive Deviance Consultant, Sharon Benjamin

\$30,000

This is a consultant with demonstrated success working healthcare providers in the technique of Positive Deviance that would participate in planning the overall approach and the educational sessions, and in coaching the participating improvement teams in the improvement collaborative.

Events planning and coordinator, TBN

\$25,000

This is a consultant that would work with the Collaborative Director and Program Manager to plan and operate the educational programs, negotiating hotel contracts, communicating with participants to ensure that materials are available, communicating with team members to encourage participation, support registration, and ensuring follow-up of the program to distribute materials that were requested or activities that were agreed upon.

Long Term Care Consultant, MA Senior Care Association

\$50,000

MA Senior Care, the leading state senior care organization has a long history of working in partnership with government, academic and healthcare organizations to address important issues impacting care for residents of long term care facilities. Consultant will identify and assist in recruitment of LTC collaborative participants, provide knowledge and expertise in the LTC setting, promote senior leadership participation, actively participate in program development, administration of the CDC LTC baseline prevention practice assessment tool, production of training materials and contribute in the training workshops.

LTC Infection Preventionist and Analytical Consultant

\$10,225

Certified and experienced IP to provide consultation on program development and review of training materials. Statistician to provide limited technical advice and counsel on reported data.

Stipends/scholarships for collaborative participants

\$30,000

The collaborative will recruit approximately 24 hospitals and 72 LTCs. To encourage enrollment and full participation, a modest stipend to support hospital

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and LTC membership is planned. Requirements will include leadership commitment, timely submission of data and active involvement in meetings and calls.

Workshops \$62,000

Estimate for 5 full day workshops for collaborative over 12 months @ cost of \$10,000 each and 8 regional sessions @ cost of \$1,500 each

Conference Calls

\$14,000

Estimate for 8 conference calls over 12 month period, 6 with lines for 100 participants for 70 minutes at 0.2/minutes = \$8400; 2 with lines for 200 participants for 70 minutes at 0.2/minutes = \$5600.

Faculty Travel and Honoraria

\$14,000

Faculty travel: Positive Deviance Consultant at the 8 regional meetings during 2 trips (\$4000), then Positive Deviance Consultant at 2 full-day workshops, LTC Infection Prevention Consultant at two full day workshops, and two additional faculty at full-day workshops (6 at \$1000 each for air, ground transport and hotel.)

Faculty honoraria: Honoraria for two expert faculty from outside Massachusetts at full day sessions (\$2000 total), and local expert presenters for antibiotic stewardship full-day session and educational calls (\$2000 total)

Website support, TBN

Consultant contract

\$2,000

This is technical consultant who posts materials on the Coalition's website in support of the improvement collaborative and the project management team.

Printing and supplies

\$6,000

Massachusetts is committed to reducing the use of paper, but will require paper supplies to prepare planning documents and reports; associated printing costs, and mailings.

G. Construction: \$0

H. Other: \$1,173 OK

Information Technology Support charge back – \$1,098 (\$1,098 x one person) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

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Payroll Charge back – \$75 A fee of \$75 per year/employee to offset payroll costs for each employee (1 x \$75).

Total Direct Charges: \$490,975

Indirect: \$8,473 OK

Total: Hospital Acquired Infections – Prevention Collaborative \$499,448. \$450,000

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Activity D.2.A:

MCV award - \$32,450

Vaccine Effectiveness (VE) - Evaluation of Meningococcal Conjugate Vaccine (MCV)

Funding request for VE MCV is for seven (7) months (January 2012 – July 31, 2012). MCV activities are currently funded from ARRA award that expires 12/31/2011.

A. Personnel: \$0

B. Fringe Benefits: \$0

C. <u>Travel: \$0</u>

D. Equipment: \$0

E. **Supplies: \$2,000** OK

Funding is requested for laboratory supplies required for testing: *N. meningitidis* \$2,000 The MDPH William A. Hinton State Laboratory Institute performs serotyping (A, B, C, D, X, Y, W135, Z, Z') on all *N. meningitidis* isolates received from providers around the state. All isolates are also subjected to PFGE typing, contributing to a PFGE pattern library that currently includes approximately 187 isolates and 119 patterns. All isolates are also sent to CDC for drug susceptibility testing. Funding is requested to support PFGE typing of all *N. meningitidis* isolates. Laboratory supplies include restriction enzymes, agarose, media, reagents and disposables.

F. Contractual: \$70,600 \$30,450

Funding is requested for a master's level epidemiologist to act as project manager.

Name of Contractor: to be determined

Method of Selection: Massachusetts maintains an existing list of master service agreements (MSA) that have been competitively procured in accordance with Massachusetts Law. The contractor will be chosen from this list after extensive interview by a DPH committee.

<u>Period of Performance:</u> January 1, 2012 – July 31, 2012 <u>Scope of work:</u> The vendor will provide a master's level epidemiologist to act as project manager for Evaluation of Meningococcal Conjugate Vaccine. Duties will include: enrolling cases, case investigations and reporting as detailed in operational plan.

Method of Accountability: The Contractor will sign a Commonwealth of Massachusetts Standard Terms and Conditions document that allows the Division to monitor and enforce strict contract conditions. In addition, the contractor will be required to follow a timeline with payment only upon receipt of deliverables. The Director of Epidemiology will work closely

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with the contractor to ensure receipt of deliverables and that timelines are kept.

Budget: \$40,600

40 hrs per week @\$35 hr x 29 weeks (7 months)

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Data Entry Services - \$30,000 Funding is requested for temporary data entry staff to assist with the entry of disease reports.

Name of Contractor: TBD

<u>Method of Selection</u>: Contractor will be chosen after a competitive procurement in accordance with Massachusetts Law.

David d of Davidayus and a January 1, 2012 July 2

Period of Performance: January 1, 2012 – July 31, 2012 (7 months)

<u>Scope of work</u>: Answer phones and receive and distribute messages pertaining to possible infectious diseases. Perform data entry on all suspect and confirmed meningitis cases reported to MDPH.

Method of Accountability: The Contractor will sign a Commonwealth of Massachusetts Standard Terms and Conditions document that allows the Division to monitor and enforce strict contract conditions. In addition, the contractor will be required to follow a timeline with payment only upon receipt of deliverables.

Budget: \$30,000

G. Construction: \$0

H. Other: \$

Total Direct Charges: \$72,600 \$32,450

<u>Indirect: \$0</u> \$32.450

Total: Evaluation of Meningococcal Conjugate Vaccine (MCV) - \$72,600

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Approved but funding not available

Activity D.2.C: Vaccine Effectiveness (VE) - Pertussis

Enhanced Activity

A. Personnel: \$0

Epidemiologist (1.0 FTE, 12 months) (TBH) \$51,000 The epidemiologist will utilize the MDPH surveillance system, MAVEN, to monitor the routine surveillance for pertussis, ensuring systematic case investigation and follow-up by other staff. This person will evaluate completeness of case information on a quarterly basis and vaccine information will be assessed monthly for all cases completed within that month. Follow up will occur with the staff person responsible for the case for missing information, as necessary. She/he will participate in all calls coordinated by CDC and pertinent information will be relayed to the other epidemiologists and local board of health nurses who conduct pertussis investigations. She/he will perform other duties as designated by her/his

B. Fringe Benefits: \$17,932

supervisor.

The fringe benefit rate is 35.16% of salaries and wages for the above-listed position.

- **C.** <u>Travel: \$0</u>
- D. Equipment: \$0
- **E. Supplies:** \$500

Funding is requested for general office supplies to support activity \$500/pp

- F. Contractual: \$0
- **G.** Construction: \$0
- H. Other: \$1,173

Information Technology Support charge back – \$1,098 (\$1,098 x one person) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back – \$75

A fee of \$75 per year/employee to offset payroll costs for each employee.

Massachusetts
ELC – CDC-RFA-CI10-101202PPHF11
Activity D.2.C
May 31, 201Massachusetts

Total Direct Charges: \$70,605

Indirect: \$7,548

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Total Vaccine Effectiveness (VE) - Pertussis: \$78,153

Activity D.3.A: Enhanced Viral Hepatitis Surveillance

New activity

Approved but funding unavailable

A. <u>Personnel - \$118,000</u>

Epidemiologist (.5 FTE, 12 months) (TBH) \$26,000 The Epidemiologist will assist with investigations of acute viral hepatitis infections, case report reviews and data analysis.

Research Assistant (1 FTE, 12 months) (TBH) \$46,000 The Research Assistant will perform data entry of laboratory reports, persons and event de - duplication and support for additional enhanced viral hepatitis surveillance efforts.

Research Assistant (1.0 FTE, 12 months) (TBH) \$46,000

The Research Assistant will perform data entry of laboratory reports, persons and event de - duplication and support for additional enhanced viral hepatitis surveillance efforts.

B. Fringe Benefit - \$41,489

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel - \$450</u>

In State - \$450

In-state travel is required for epidemiology staff to visit boards of health, private practices, clinics, regional offices, local and state agencies and hospitals to provide in-service training and follow-up to implement and monitor grant guidelines and objectives and solicit participation in active surveillance activities. Epidemiology and laboratory staff to travel approximately 1,000 miles x \$0.45=\$450

D. Equipment - \$0

E. <u>Supplies - \$1,500</u>

Funding is requested for general office supplies to support activities @\$500 per year/per person (3 \times \$500=\$1,500).

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F. Contractual \$0

G. Construction - \$0

H. Other \$3,519

Information Technology Support charge back – \$3,294 (\$1,098 x 3 persons) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back - \$225 A fee of \$75 per year/employee to offset payroll costs for each employee. (3 x \$75 = \$225)

Total Direct Charges: \$164,958

Indirect: \$17,464

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Total: D.3.A. Enhanced Viral Hepatitis Surveillance - \$182,422

Activity D.3.B: Under Reporting of Viral Hepatitis Approved but funding unavailable

New activity

A. <u>Personnel - \$26,000</u>

Epidemiologist (.5 FTE, 12 months) (TBH) \$26,000

The Epidemiologists will work in collaboration with ISIS epidemiologists and Health Information Exchange Coordinator to conduct quality assurance of viral hepatitis surveillance data, including those received from electronic laboratory reports and electronic medical record systems. This individual will also conduct record review at sampled facilities and provide detailed review and analysis of these data.

B. Fringe Benefit - \$9,142

The fringe benefit rate is 35.16% of salaries and wages for the above-listed positions.

C. <u>Travel - \$2,395</u>

In State - \$900

In-state travel is required record review at sampled facilities. ($$0.45 \times 2,000$ miles = \$900)

Out of State Travel - \$1,495

CDC Meeting – as required, Atlanta, GA

Funding is requested for one persons to attend a meeting at CDC as may be required by grant funding.

Air @\$1,000 pp x 1 persons	\$1,000
Lodging @\$160 x 2 nights x 1 persons	\$320
Per Diem – 3 days @\$25 pp/pd	\$75
Ground Transportation \$100 pp	<u>\$100</u>

Total \$1,495

D. Equipment - \$0

E. <u>Supplies - \$500</u>

Funding is requested for general office supplies to support activities @\$500 per year/per person.

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F. Contractual \$0

G. Construction - \$0

H. Other \$1,173

Information Technology Support charge back – \$1,098 (\$1,098 x 1 persons) A cost assessment has been determined for support of computer equipment/rental/internet access/ software support and technical support for each staff computer and dedicated laboratory computer equipment. The cost of each computer support is \$1,098 per staff or dedicated laboratory equipment. This cost is in lieu of computer equipment request.

Payroll Charge back – \$75

A fee of \$75 per year/employee to offset payroll costs for each employee.

Total Direct Charges: \$39,210

Indirect: \$3,848

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Total: D.3.B: Under Reporting of Viral Hepatitis - \$43,058

Activity D.3.C: Young Adults with Hepatitis C Virus

New activity

Fund as requested - \$30,900

- A. Personnel \$0
- B. Fringe Benefit \$0
- **C.** Travel \$0

In State - \$900 OK In-state travel is required record review at sampled facilities. (\$0.45 x 2,000 miles = \$900)

- D. Equipment \$0
- E. Supplies \$0
- F. Contractual \$30,000 OK

Contract Epidemiologist - \$30,000

Name of Contractor: TBD

Method of Selection: Contractor will be chosen after a competitive procurement in

accordance with Massachusetts Law.

Period of Performance: August 1, 2011 – July 31, 2012 (12 months)

Scope of work: The Division of Epidemiology and Immunization will hire a contract epidemiologist to analyze existing surveillance data on all HCV cases among people ages 18 to 25 years in a recent 6 month period; conduct hepatitis C investigations; write report detailing HCV among individuals ages 18-25; and provide support for viral hepatitis surveillance activities.

Method of Accountability: The Contractor will sign a Commonwealth of Massachusetts Standard Terms and Conditions document that allows the Division to monitor and enforce strict contract conditions. In addition, the contractor will be required to follow a timeline with payment only upon receipt of deliverables. Budget: \$30,000 (20 hrs per week x 50 x \$30 per hr.)

- G. Construction \$0
- H. <u>Other \$0</u>

Total Direct Charges: \$30,900

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Indirect: \$0

Indirect charges are based upon the current Department of Health and Human Services and Commonwealth of Massachusetts negotiated indirect cost rate of 14.8% of salaries and wages.

Total: D.3.C: Young Adults with Hepatitis C Virus - \$30,900 OK